FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2012 NOV 15 AM 11: 29

FORM 1	ONGANIZATION						Offi	EC M	AIL C	ENTE
1. NAME OF COMMITTEE (in	full)	(Check is chan	if name ged)		nple:If typing, type the lines.	12FE				
VERMON	REP	JBLICAI	N EXE	CUT	IVE BOAR	RD,		1 1 1 .	1_1_1	لـــــــ
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ADDRESS (number a	nd street)	P. O. B	OX 66	7313	3	1 1 1 1				لب
(Check if address is changed)		POMPA	NO BI	EAC	F4	FL	33	066	- - -	<u>ш</u>
			(CITY		STATE		ZIP C	ODE	
COMMITTEE'S E-MA (Check if is change	address		-		ecutiveBoa	rds@g	mail,	com	1-1-1	
COMMITTEE'S WEB	PAGE ADD	RESS (URL)								
(Check if is change							1-1-1		1 1 1	
2. DATE 11" '10° '2012 '										
3. FEC IDENTIFIC	CATION NU	MBER	С							
4. IS THIS STATE	MENT X	NEW (N)	OR		AMENDED (A)					
I certify that I have a		Statement and		-	-	it is true, co	orrect and	complete.		
Signature of Treasure		Petern	Present	p		Date	11 ′	10°	ŽO ′1	lŽ [*]
NOTE: Submission of		·		_	ject the person signing		-	penalties of	2 U.S.C	. §437g.
Office Use Only					For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100			FEC F(